



R. B. Turnbull Jr. M.D. WOC Nursing Education Program

Daily Journal Entry with Plan of Care & Chart Note

Student Name: Regina Averyanova Day/Date: 07/08/2025

Number of Clinical Hours Today: 8

Care Setting: Hospital Ambulatory Care Home Care Other

Preceptor: Deanne Reed, RN

Clinical Focus: Wound Ostomy Continence Yes

This assignment should be WOC focused and approached as both patient documentation and critical thinking development. Complete each section of the document. Once you have completed the form, save the document by clinical date and preceptor. Submit to your Practicum Course dropbox for instructor review & feedback. Journals should be submitted to your dropbox no later than **48 hours** following the clinical experience day. See samples in course Resource area to assist you with this assignment.

Reflection: Describe your patient encounters & types of patients seen.

Today I was at the Glickman urology and kidney institute urodynamics lab. During today's clinical, preceptor explained urodynamic testing, how these tests are done, indications for these procedures, and follow up with the patients.

Patient A was 49-year-old male patient with the primary diagnosis of BPH with obstruction/lower urinary tract symptoms. No other past medical history on record. It was patient's first-time visiting Cleveland Clinic, and he came from Canada. The following tests were done during today's visit: uroflowmetry, cystometrogram, and pressure-flow voiding study.

Patient B was 28 year old female patient who came to the clinic with re-current UTIs. Present medical history includes neurogenic bladder, bilateral hydronephrosis, incomplete bladder emptying, and multiple sclerosis. The following tests and procedures were performed today: cystoscopy, right urethral stent removal, and videourodynamic test was performed.

- *Good experiences here! – please elaborate on your hours completed above.*

WOC nurses function as consultants and develop plans of care (POC) for other care givers as a guide to providing care in the WOC nurse's absence. For this part, select one patient who is an example of the identified specialty hours for this clinical day. Write a chart note beginning with a brief, focused history and history of present illness, including why you are seeing the patient. Then, describe the visit including any physical assessment, interactions, interventions, and evaluations. Complete a Braden Scale assessment if this was an inpatient encounter. Identify any specific products used or recommended for use. Remember, this note reflects all that you *did* at your visit, the plan of care reflects your direction/orders *after* the encounter to be performed in your absence.

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Chart note:**Braden Risk Assessment Tool: n/a**

Sensory Perception	4
Moisture	4
Activity	4
Mobility	4
Nutrition	3
Friction/Shear	3
Total	22

This is a 28 year old female patient, AAO x 4, who came to the clinic to follow up with the urologist due to recurrent UTIs. Patient has neurogenic bladder secondary to multiple sclerosis. Patient has incomplete bladder emptying and bilateral hydronephrosis due to non-compliant bladder. Patient has a history of multiple hospitalizations due to UTIs and associated symptoms of abdominal pain, discomfort, spasms, urinary frequency, hematuria, and pyuria. In April 2025, right urethral stent was placed, and it was exchanged in June, 2025. Additional tests and procedures that were done for this patient in recent months were multiple CT scans of abdomen and pelvis, renal ultrasound, renal flow scan, and left salpingectomy. Patient is currently on doxycycline hyclate 100 mg 1 tab PO BID x 7 days for UTI, which patient will complete tomorrow on 7/9/25 and trosipium 20 mg 1 tab PO BID for stent induced bladder spasms.

Education was provided by the urologist on the upcoming procedure and patient consented. Patient also gave permission for this continence student nurse to be present.

Cystoscopy procedure was performed today. 2% Lidocaine gel was instilled in the urethra, and flexible cystoscope inserted without any complication. Pan cystourethroscopy was performed. Additionally, right urethral stent was removed without any complication, and the stent was intact. Patient tolerated procedure well. Pt reported no pain or discomfort at that time.

Additionally, patient underwent videourodynamics today to determine bladder compliance. Patient discussed this test with the urologist at the previous visit. Patient came prepared and shaved hair from the pubic and inner thigh area. Patient verbalized understanding of the test and gave consent to begin the testing. All staff wore proper PPEs during the examination and x-ray. Patient was able to void and there was no residual volume. Two 7 Fr catheters were placed. One catheter in the urethra and the other in anus. Contrast was instilled slowly into the bladder. The goal was to see whether there was a backflow of urine into ureters. After 117 ml was instilled, patient stated, "I cannot hold it anymore." Patient had a strong urge to void, and monitor showed spikes/spasms on Pves and Pabd. Urologist was present during the test. Multiple x-ray images were taken, which showed no backflow of urine. Per urologist testing was stopped and patient was instructed to void. Patient had a significant, visible urge to urinate; however, when she tried to initiate the void, she was unable to do it. Patient became very anxious and started crying. Patient stated, "this never happened before." Nursing provided emotional support to the patient. Patient stopped crying and was able to calm herself. Afterward, patient voided in the measuring cup 141 ml of pink, cloudy urine. For the remainder of the appointment, patient remained calm. Reassurance and emotional support were provided to the patient. At the end of the visit, LIP ordered urine culture to be collected today. *Ok- well written.*

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Using the information from the chart note, develop a plan of care to be executed by other members of the healthcare team in your absence. Statements should be directive and holistic. Write as nursing orders.

WOC Plan of Care (include specific products)

Educate patient regarding the test, how it is conducted, and what to expect. Include education on catheter placement, and encourage patient to ask question for clarification as needed.
Patient underwent urethral stent removal today. Assess patient for pain. Monitor patient for any new signs of infection. Patient has hematuria and urine is pink and cloudy, it is important to teach patient to monitor urinary output and to report to MD presence of new bleeding (blood clots). Additionally, it is important to inform patient that after stent removal, some discomfort can be expected initially, but then it should subside. It is important to stress the importance of completing the course of antibiotics even if patient feels better. Additionally, if patient's condition worsens, patient must seek urgent medical care.
Schedule a follow up visit with urologist in two weeks.

Remember this section should be directive – make sure short clear instructions are provided for the appropriate setting. This is an outpatient procedure so this should focus on directions you (the specialist) provide to the patient for what to do post-visit. The note reflects what was done. Make sure to apply this moving forward.

Describe your thoughts related to the care provided. What would you have done differently?

During the visit, nurses provided compassionate care. Patient received clear, detailed education. Consent was received from the patient to start the testing/procedure and for the continence nurse student to be present. Nurses were open and tried to accommodate patient's needs. Reassurance and emotional support were provided throughout the test. When patient was unable to void and started crying, all the staff remained in the room (2 nurses, 1 x-ray technician, and LIP). I think it would have been better if everyone, but primary nurse left the room and gave the patient privacy, while primary nurse continued to reassure and support the patient. Also, I found it interesting that urologist ordered urine culture today even though patient is currently on antibiotics – *yes, interesting. Urinalysis may also be prudent here.*

You should have a learning goal for each clinical day. What was your goal for the day? Was it met? Why or why not?

Goals

What was your goal for the day?

I have never been in urodynamic lab before, and I wanted to learn as much as I could about the tests. My goal was to learn about urodynamic testing, how it is performed, and nursing interventions during the testing. – *this is a unique practice area!*

What is/are your learning goal(s) for tomorrow? (Share learning goal with preceptor)

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Tomorrow, I am scheduled to be on A30. I am looking forward to the clinical, and would like to practice ostomy pouching selection based on patient's anatomy, stoma characteristics, and patient's level of activity. *Remember to choose a marking patient for one ostomy focused journal. Apply concepts above when building you POC for the outpatient.*

For instructor use only. Do not remove or edit:

CRITICAL ELEMENTS	Completed	Missing
Medical record note reflects that of a specialist:		
<ul style="list-style-type: none"> Identifies why the patient is being seen 	✓	
<ul style="list-style-type: none"> Describes the encounter including assessment, interactions, any actions, education provided and responses 	✓	
<ul style="list-style-type: none"> Completes Braden Scale for inpatient encounter 	✓	
<ul style="list-style-type: none"> Includes pertinent PMH, HPI, current medications and labs 	✓	
<ul style="list-style-type: none"> Identifies specific products utilized/recommended for use 	✓	
<ul style="list-style-type: none"> Identifies overall recommendations/plan 	✓	
Plan of Care Development:		
<ul style="list-style-type: none"> POC is focused and holistic 	See comments	
<ul style="list-style-type: none"> WOC nursing concerns and medical conditions, co-morbidities are incorporated 	✓	
<ul style="list-style-type: none"> Braden subscales addressed (if pertinent) 	✓	
<ul style="list-style-type: none"> Statements direct care of the patient in the absence of the WOC nurse 	✓	
<ul style="list-style-type: none"> Directives are written as nursing orders 	✓	
Thoughts Related to Visit:		
<ul style="list-style-type: none"> Critical thinking utilized to reflect on patient encounter 	✓	
<ul style="list-style-type: none"> Identifies alternatives/what would have done differently 	✓	
Learning goal identified	✓	

*Hi Regina – see my comments throughout this journal – continue to apply feedback to future submissions. Please clarify how many hours were completed this day so this can be added to your continence hours. Reach out with any further questions!
-Mike*

Reviewed by: _____ Date: _____

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